




FAMILY SUPPORT JOB ALIKE

2018-19 CAPTAIN SUMMITS

INTRODUCTIONS

Please share:

- Your name & agency
- If we came to your town where should we eat or what should we do / visit?



FEDERAL AND STATE FUNDED PARENT SUPPORT ORGANIZATION CADRE REQUIREMENTS

- Share information with your support organization staff about:
 - CAPTAIN*
 - EBPs for ASD*
 - LTSAE resources so that they may assist with information dissemination*
- Share information with families about EBPs for ASD to support advocacy *
- Act as a LTSAE "Deputy Ambassador"
- Participate in regional meetings to support regional goal implementation

* Does not need to be a formal training

SHARE INFORMATION ABOUT CAPTAIN WITH YOUR FRC

Tools to use:

- Five minute video posted to the CAPTAIN homepage (<http://www.captain.ca.gov/index.html>)
- CAPTAIN brochure posted under the 'About' tab (<http://www.captain.ca.gov/about.html>)
- Cadre Requirements Powerpoint posted to 'About' tab (<http://www.captain.ca.gov/about.html>)

DEPUTY AMBASSADOR DUTIES

- Share LTSAE materials in your community
- Assist with **Regional** Milestones Brochure development and dissemination to support child find

Tools to use:

- Tracker App in Spanish! (flyer - https://www.cdc.gov/ncbddd/actearly/pdf/milestone_tracker_app/Milestone-Tracker-App-Flyer_Eng-and-Spanish-10-29-P.pdf)
- New parent video – "Milestones Matter for Families" (<https://www.cdc.gov/ncbddd/actearly/parents/index.html>)
- Focused materials for ECE, healthcare providers, WIC, home visiting, families (<https://www.cdc.gov/ncbddd/actearly/index.html>)

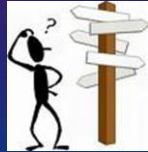
SHARE INFORMATION ABOUT EBPS WITH YOUR FRC AND FAMILIES TO HELP THEM MAKE INFORMED DECISIONS

- What questions do you hear and how do you respond?
- How do you assist families considering non EBP? (limited resources / need to consider EBPs first)

Tools to use

- Selecting EBPs AFIRM Module <https://afirm.fpg.unc.edu/selecting-ebp>

HOW MANY RESULTS DO YOU THINK YOU WOULD GET IF YOU DID A Google SEARCH FOR "AUTISM TREATMENT"?



Google autism treatment

About 177,000,000 results (0.72 seconds)

Respite Care Camps Year Round | Private Cupertino Campus
www.artcsandiego.com/

All Autism Conditions Welcome. Private Pay & Regional Co-Funding. 1-to-1s. Our Private Campus. School Year Programming. Enrollment, FAQs, Map.

RESULTS: 177,000,000 FOR AUTISM TREATMENT ON OCTOBER 17, 2018!!!!

Seriously. A Plan To Fit Your World. Real Time Collaboration. Quick Clinical Responses.

Autism Spectrum Disorder Treatment | Helpful Tips & Strategies
www.artcsandiego.com/

What is Autism Spectrum Disorder? How can you help your loved one? Get the facts. Early Intervention. Support For All. Effective Services. Parental Support. Autism Treatment Center. Job & Life Skills.

CAPTAIN California Autism Professional Training and Information Network

What are Evidence-Based Practices (EBPs)
for ASD?



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DEFINITION OF EBP (NPDC)



NPDC definition of an EBP:

“Focused intervention practices that have substantial evidence for effectiveness in promoting positive outcomes for learners with ASD”

WHY ARE THESE EBP RESOURCES SO IMPORTANT?





Knowing these EBPs:

- helps us know which treatments have **evidence of effectiveness** and which treatments do not
- allows us to make **informed decisions** when we select treatments
- provides us with the opportunity to support individuals with ASD in **reaching their full potential**



27 EVIDENCE – BASED PRACTICES (2014)

Antecedent-based interventions	Pivotal response training
Cognitive behavioral intervention*	Prompting
Differential reinforcement	Reinforcement
Discrete trial training	Response interruption/redirection
Exercise	Scripting
Extinction	Self-management
Functional behavior assessment	Social narratives
Functional communication training	Social skills training
Modeling	Structured play groups
Naturalistic interventions	Task analysis
Parent-implemented intervention	Technology-aided intervention/instruction
Peer-mediated instruction/intervention	Time delay
Picture Exchange Communication System™	Video modeling
	Visual supports

The following interventions have been identified as falling into the Established level of evidence:

- ❖ Behavioral Interventions
- ❖ Cognitive Behavioral Intervention Package
- ❖ Comprehensive Behavioral Treatment for Young Children
- ❖ Language Training (Production)
- ❖ Modeling
- ❖ Natural Teaching Strategies
- ❖ Parent Training
- ❖ Peer Training Package
- ❖ Pivotal Response Training
- ❖ Schedules
- ❖ Scripting
- ❖ Self-Management
- ❖ Social Skills Package
- ❖ Story-based Intervention

**14 ESTABLISHED
INTERVENTIONS
(for individuals under age 22)**



Emerging interventions are those for which one or more studies suggest they may produce favorable outcomes. However, before we can be fully confident that the interventions are effective, additional high-quality studies are needed that consistently show these interventions to be effective for individuals with ASD. Based on the available evidence, we are not yet in a position to rule out the possibility that Emerging interventions are, in fact, not effective.

A large number of studies fall into the Emerging level of evidence. We believe scientists should find fertile ground for further research in these areas.

The following interventions have been identified as falling into the Emerging level of evidence:

- ❖ Augmentative and Alternative Communication Devices
- ❖ Developmental Relationship-based Treatment
- ❖ Exercise
- ❖ Exposure Package
- ❖ Functional Communication Training
- ❖ Imitation-based Intervention
- ❖ Imitation Training
- ❖ Language Training (Production & Understanding)
- ❖ Massage Therapy
- ❖ Multi-component Package
- ❖ Music Therapy
- ❖ Picture Exchange Communication System
- ❖ Reductive Package
- ❖ Sign Instruction
- ❖ Social Communication Intervention
- ❖ Structured Teaching
- ❖ Technology-based Intervention
- ❖ Theory of Mind Training

**18 EMERGING
INTERVENTIONS
(for individuals under age 22)**




Unestablished interventions are those for which there is little or no evidence in the scientific literature that allows us to draw firm conclusions about their effectiveness with individuals with ASD. There is no reason to assume these interventions are effective. Further, there is no way to rule out the possibility these interventions are ineffective or harmful.

The following interventions have been identified as falling into the Unestablished level of evidence:

- Animal-assisted Therapy
- Auditory Integration Training
- Concept Mapping
- DIR/Floor Time
- Facilitated Communication
- Gluten-free/Casein-free diet
- Movement-based Intervention
- SENSE Theatre Intervention
- Sensory Intervention Package
- Shock Therapy
- Social Behavioral Learning Strategy
- Social Cognition Intervention
- Social Thinking Intervention

13 UNESTABLISHED INTERVENTIONS
(for individuals under age 22)



Research Findings for Adults (22+ Years)

Established Interventions for Adults Only 1 Established

The only intervention to be established for individuals ages 22 years and older is Behavioral Interventions. Behavioral intervention category consists of applied behavior analysis, interventions to increase adaptive behaviors and decrease challenging behaviors. Examples of specific strategies identified in the 27 articles supporting Behavioral Interventions are provided in the table on the following page.

Emerging Interventions for Adults

Emerging interventions are those for which one or more studies suggest they may produce favorable outcomes. However, before we can be fully confident that the interventions are effective, additional high quality studies are needed that consistently show these interventions to be effective for individuals with ASD. Based on the available evidence, we are not yet in a position to rule out the possibility that Emerging interventions are, in fact, not effective.

The following intervention has been identified as falling into the Emerging level of evidence:


- Vocational Training Package

Unestablished Interventions for Adults

Unestablished interventions are those for which there is little or no evidence in the scientific literature that allows us to draw firm conclusions about their effectiveness with individuals with ASD. There is no reason to assume these interventions are effective. Further, there is no way to rule out the possibility these interventions are ineffective or harmful.


The following interventions have been identified as falling into the Unestablished level of evidence:

- Cognitive Behavioral Intervention Package
- Mindfulness
- Music Therapy
- Sensory Integration Package



CAPTAIN RECOMMENDS

- Use 27 EBPs from NPDC
- Use 14 Established Interventions for Ages 0-22 from NAC
- Use 1 Established Intervention for Ages 22+ from NAC





SUMMARY—Why are EBPs important to know:

- helps us know which treatments have evidence of effectiveness and which treatments do not
- allows us to make informed decisions when we select treatments
- provides us with the opportunity to support individuals with ASD in reaching their full potential



Use these Quick Links on the CAPTAIN website to access these EBP resources!

SUPPORT FROM CAPTAIN LEADERSHIP

- What would be helpful?
- What would it look like?



PARTICIPATION IN REGIONAL MEETINGS

- Highlights
- Challenges
- Is there a standing agenda item for the Deputy Ambassador / Family Support Cadre member?